



What's Up with Adolescents and Pregnancy?

An Alabama Snapshot and the Impact of Social Media on Generation Z and Alpha

- Provide a general overview of teen pregnancy trends in Alabama
- Explain the behavioral impact of social media on adolescents and teen pregnancy prevention
- Explain evidence-based intervention strategies that are used to decrease teen pregnancy
- Discuss ADPH initiatives to address teen pregnancy throughout the state
- List available resources that clinical and non-clinical service providers can access when working with adolescent teenagers

Teen Pregnancy is a Public Health Issue

Unwanted pregnancies at any age can lead to life-long consequences.

High teenage pregnancy rates are linked to high levels of social exclusion, and poor knowledge of contraception.

Being a teenage parent can lead to an increase in relative poverty, unemployment, poorer educational achievements and poor health of the child.

BMJ 2001;323:1428



Teen Pregnancy is a Public Health Issue

High teenage pregnancy rates are a reflection of poor sexual health practice.

Teenage pregnancy is an important public health issue because integrated action across several sectors is needed.

There is also the complexity of providing maternity services for teenagers who decide to continue with a pregnancy.

BMJ 2001;323:1428



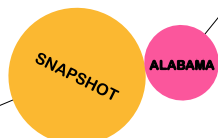
Teen Pregnancy is a Public Health Issue

The improvement of sexual health services education can result in fewer pregnancies and STIs, as well as healthier sexual attitudes and behavior.

Effective ways of reducing unintended conceptions include improved access to services, better sex education, and linking into plans to reduce sexually transmitted infections.

International Journal of Epidemiology, Volume 31, Issue 3, June 2002

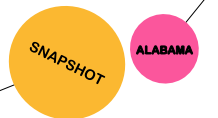




Teen Pregnancy Facts

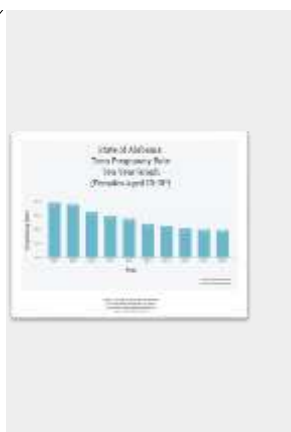
- Teen pregnancy rate in 2021 ranks 5th in the United States behind Arkansas, Mississippi, Louisiana, and Oklahoma.
- The teen pregnancy rate decreased by 51% from 2008 to 2017.





Teen Pregnancy Facts

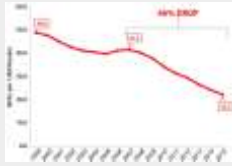
- Decline may be due to more teens having the knowledge, skills and access to make informed sexual health decisions.
- Adolescents remain disproportionately affected by sexually transmitted infections.



SNAPSHOT

ALABAMA

Progress in Teen Pregnancy Prevention



Major decrease in teen births between 2007 - 2015

Teen Pregnancy Facts

- Since 2008, the teen pregnancy rate for females between the ages of 10-19 has decreased by 50%, however the US remains the highest in the developed world.
- The 2017 Alabama state teen pregnancy rate was 19.2.

SNAPSHOT

ALABAMA



Teen Pregnancy Facts

7 counties were between 50%-99% higher than the state rate.

- Franklin
- Marshall
- Fayette
- Greene
- Hale
- Coosa
- Conecuh

Adolescent Risk Behavior

CDC's Youth Risk Behavior Surveillance System 2019 (YRBSS)

In 2019, about 38% of high school students had ever had sexual intercourse. Fewer students had ever had sex from 2009 through 2019.

Although all groups made noticeable progress, about 23% fewer black students reported ever having sex.

In 2019, about 27% of high school students were currently sexually active (i.e., they had sexual intercourse with at least one person during the past 3 months).

The positive trend was most notable for black students. A 19-point drop in the percentage of black students who were currently sexually active.

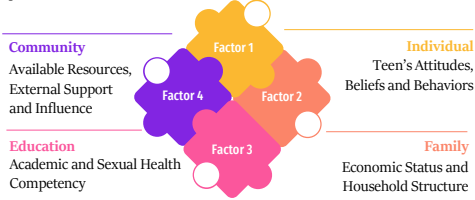
Adolescent Risk Behavior

CDC's Youth Risk Behavior Surveillance System 2019 (YRBSS)

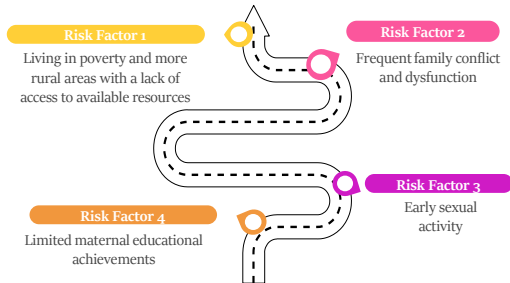
<p>In 2019, about 9% of sexually active high school students used dual methods of protection the last time they had sex.</p>	<p>In 2019, only about 9% of high school students had been tested for sexually transmitted diseases (STDs) during the past year.</p>
<p>The percentage of all students using the recommended dual method to protect against both STDs and unintended pregnancy is too low, but especially among Hispanic students.</p>	<p>More black students had been tested for STDs during the past year than white students. More female students had been tested for STDs during the past year than male students.</p>

Risk and Protective Factors

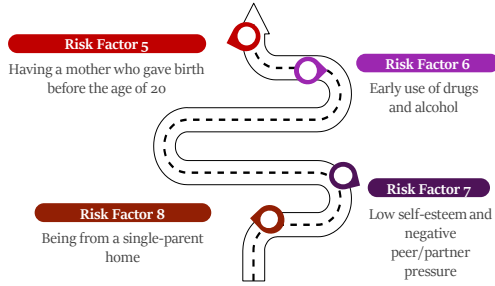
It is necessary to understand the associated risk and protective factors in order to appropriately implement prevention efforts. Risk factors encourage or promotes behaviors that increase the likelihood of teen pregnancy, while protective factors decrease these behaviors.



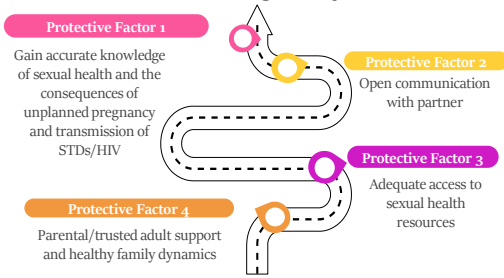
Key Risk Factors for Teen Pregnancy



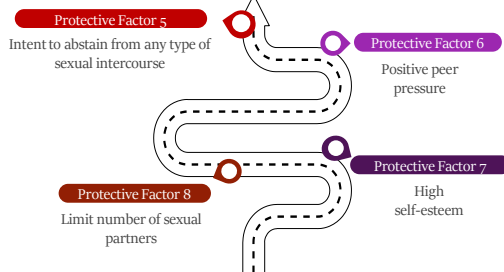
Key Risk Factors for Teen Pregnancy



Key Protective Factors to Prevent Teen Pregnancy



Key Protective Factors to Prevent Teen Pregnancy



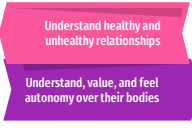
Why is Sexual Health Important for Adolescents?

- 82% of teen pregnancies are unplanned annually
- Age 15-24 account for 25% of new HIV cases and make up almost half of all new STD cases each year
- Physical and emotional health issues
- Communicate with parents, friends and intimate partners about sexuality
- Freely discuss contraception and condoms, as well as setting sexual behavior limits
- Helps delay sexual initiation until they are ready



Why is Sexual Health Important for Adolescents?

- Maintaining a healthy relationship requires skills many young people are never taught
- Develop positive communication, conflict management and negotiation skills
- Lead to unhealthy and even violent relationships among youth
- Comprehensive sexual health education teaches the basics of puberty, but also instills the right to decide, what behaviors they engage in, and to say no to unwanted sexual activity
- Helps young people examine the forces that contribute to a positive or negative body image



Why is Sexual Health Important for Adolescents?

- 8% of high school students have been forced to have sexual intercourse
- Good sex education teaches young people what constitutes sexual violence and informed consent; understand that sexual violence is wrong and how to find help if they have been assaulted
- The past few decades have seen huge steps toward equality for lesbian, gay, bisexual, and transgender (LGBT) individuals
- 82% have experienced harassment due to their sexual orientation, and 38% have experienced physical harassment



Why is Sexual Health Important for Adolescents?

- Student sexual health can affect academic success
- The CDC has found that students who do not engage in health risk behaviors receive higher grades

Protect their academic success



- Health-related problems and unintended pregnancy can both contribute to absenteeism, dropout and lack of higher education achievement

Generations and Technology

Baby Boomers Generation X

BABY BOOMERS (1946 to 1964)	GENERATION X (1965 to 1980)
<ul style="list-style-type: none"> • Post WWII babies • Not technology savvy • Willing to use tech but are not dependent on it • Era of cable TV • Facebook & LinkedIn 	<ul style="list-style-type: none"> • Receptive to tech that improves their daily lives • Research • No personal information • Quickly picked up mobile devices • Practical • Broadband internet era • Average of 6 hrs./week • Facebook

Generations and Technology

Baby Boomers Generation X Millennials Generation Z

MILLENNIALS (1981 - 1996)	IGEN/GENERATION Z (1997 - 2012)
<ul style="list-style-type: none"> • Era of rapid technological advances • 36% use social media for news and current events • 34% use to fill up their spare time, while 32% use to connect with friends • Facebook & Instagram 	<ul style="list-style-type: none"> • Influenced by the connected digital environment. • Heavy users of mobile devices • Used mostly for content and entertainment • 44% check profiles hourly • YouTube, Instagram & Snapchat, TikTok

Generations and Technology

Baby Boomers Generation X Millennials Generation Z Generation Alpha

GENERATION ALPHA (2013 - 2025)

- "Digital natives"
- 8+ hours per day
- Very trusting
- Nearly 50% consume news vs. 18% of boomers
- 1/10 will work in social media
- Prefer digital commerce
- Instagram & TikTok



Generations and Technology

Baby Boomers Generation X Millennials Generation Z Generation Alpha



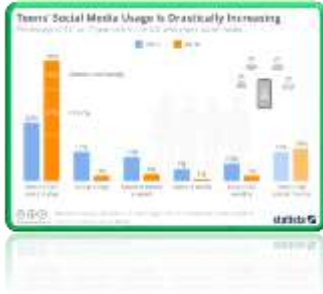
Generations and Technology

Baby Boomers Generation X Millennials Generation Z Generation Alpha



Generations and Technology

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Generations and Technology

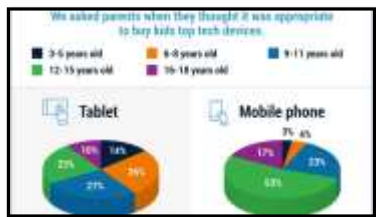
Baby Boomers Generation X Millennials Generation Z Generation Alpha

- Only 2% of Gen. Alpha kids are not using any type of technology
- Kids younger than 12 are more advanced than their tech-savvy parents
- Average age a child gets a smartphone is 12

- Mobile device is the favorite "toy" for 44% of Gen Alpha kids
- 34% of parents use tech to calm children
- Parental control is the key in mitigating the negative impact of tech on children

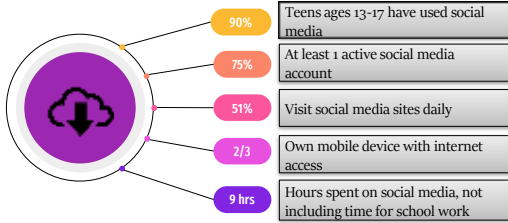
Generations and Technology

PCMag polled 1,000 parents of school-age children about when they'd feel comfortable buying their kids smartphones, tablets, laptops, and smart speakers.



Adolescents and Social Media

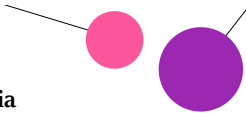
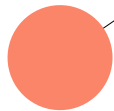
Social media plays a huge role in teen culture today. Teens today have to deal with factors that impact their development to which generations before did not.



Aspects of Social Media

POSITIVE ASPECTS

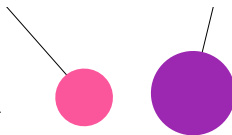
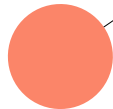
- o Connect with friends and family
- o Find communities with common interests
- o Sharing artistic expression
- o Enlightenment and increased exposure to new things
- o Marketing and business
- o Entertainment and education



Aspects of Social Media

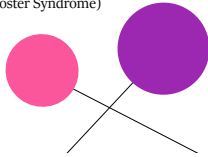
NEGATIVE ASPECTS

- o Exposure to harmful and inappropriate content
- o Predators
- o Cyber bullying
- o Oversharing of personal information
- o Exposure to excessive advertisement
- o Privacy concerns (collection of data)
- o Identity theft or being hacked
- o Interference with sleep, exercise, schoolwork, self-esteem, interpersonal communication and family dynamics



Negative Impact of Social Media on Adolescents

- Increase risk of anxiety, low self-esteem and depression
- Increased indirect communication/decrease interpersonal communication
- Lack of social skills and identification of social cues
- Affects ability to develop appropriate reactions and responses to body language, facial expressions, vocal tones and inflections
- Impeding navigation of relationships and employment
- Delay experience with social negotiation and conflict resolution
- Confidence to be cruel
- Body image surveillance
- Creating unrealistic online identities (Imposter Syndrome)



Impact of Social Media on Adolescents


Adolescents can be particularly vulnerable to potential negative impacts of social media on mental health in part because social connectedness is important for their development.

Negative Impacts of Social Media on Mental Health




Social Media and Adolescent Sexual Health

POPULARITY



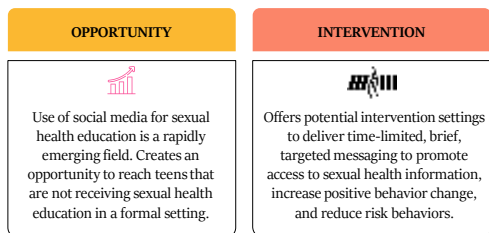
Social media sites and apps have become world leading platforms that serve many populations for many reasons.

COMFORT



Teens are more comfortable researching in confidentiality within an environment of their peers. Peer education can be an effective tool when accurate.

Social Media and Adolescent Sexual Health

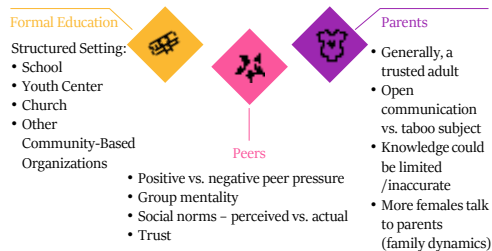


Tips for Working With Generation Z & Alpha

Young people face important decisions about relationships, sexuality, and sexual behavior. The goal is to provide young people with honest, age-appropriate information and skills necessary to help them take personal responsibility for their health and overall well being.



American Adolescents' Sources of Sexual Health Education



American Adolescents' Sources of Sexual Health Education

Healthcare Provider

- Accurate education
- Access to care and resources
- Often not discussed during primary care visits
- Uncomfortable
- Confidentiality concerns

Digital Media

- Almost universal access
- Meet them where they are
- Confidential research
- Finding credible sources

Evidence-Based Vs. Evidence-Informed Education Approach

Evidence-Based

Evidence-based programs have been formally scientifically evaluated and demonstrated effectiveness in achieving desired outcomes.

May not be effective for participants in other contexts such as different socioeconomic backgrounds or ethnicities.

Evidence-Informed

Evidence-informed programs have not been the subject of a formal research study but do incorporate key characteristics research has identified in programs that have been found to be effective in changing health and risk behaviors.

Evidence-Based Vs. Evidence-Informed Education Approach

Evidence-Based

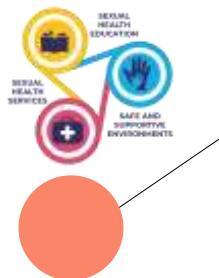
- Medically accurate
- Maintaining program fidelity is very important
- Teach curriculum as intended to achieve desired outcome
- Minor adaptations are acceptable

Evidence-Informed

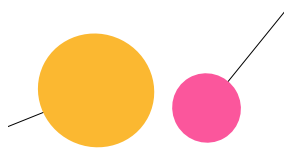
- Medically accurate
- Inclusive and innovative
- Flexible and adaptable
- Blended knowledge from multiple sources
- Radically up-to-date, with annual updates

Evidence-Based Vs. Evidence-Informed Education Approach

Over a period of time, health education researchers began to assemble a catalog of characteristics of effective health education curricula, based on what the research revealed. A synthesis of all the relevant literature resulted in a list of 15 Characteristics of an Effective Health Education Curriculum.



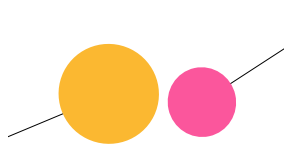
These characteristics can be used as a tool to assess whether curricula have incorporated the features most likely to contribute to effective outcomes.



Health Education Curriculum Analysis Tool

The **Health Education Curriculum Analysis Tool (HECAT)** is an assessment tool developed by the Centers for Disease Control and Prevention in partnership with health education experts from state and local education agencies, schools, colleges and universities, and national organizations.





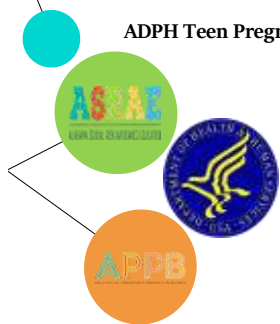
Health Education Curriculum Analysis Tool

Tool to analyze curriculum fundamentals, such as learning objectives, curriculum design, culturally responsive and inclusive characteristics, and instructional strategies and materials.

Results should be used to make health education curriculum decisions to fit the population you serve.

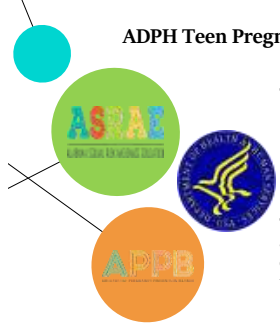


ADPH Teen Pregnancy Prevention Branch



The Adolescent Pregnancy Prevention Branch (APPB) works to reduce the incidence of unplanned pregnancies and sexually transmitted infections (STIs) among teens in Alabama. This is made possible through federal grants awarded to the Alabama Department of Public Health by the Department of Health & Human Services (HHS), Family & Youth Services Bureau (FYSB).

ADPH Teen Pregnancy Prevention Branch

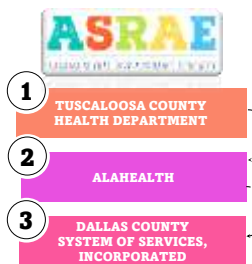


The two programs are:

- o Sexual Risk Avoidance Education Program
- o Personal Responsibility Education Program

Through these grants, funding is made available to local community organizations to assist in these efforts in their communities.

Sexual Risk Avoidance Education Program



The goal of ASRAE is to provide effective, evidence-based abstinence education programs to middle-school youth to equip them to resist sexual risk behaviors and to make better choices as they mature into young adulthood.

ASRAE will provide effective, evidence-based abstinence programs with fidelity to at-risk youth ages 10 – 19, with an emphasis on youth aged 10-14, to promote abstinence from sexual activity.



Sexual Risk Avoidance Education Program

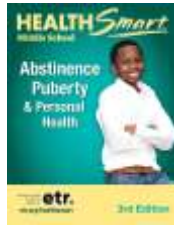
- 1 TUSCALOOSA COUNTY HEALTH DEPARTMENT
- 2 ALAHEALTH
- 3 DALLAS COUNTY SYSTEM OF SERVICES, INCORPORATED

ASRAE implements *Making a Difference! (MAD!)* with 8th grade participants and *HealthSmart: Abstinence Puberty & Personal Health* with 6th and 7th grade participants. MAD! is implemented in community settings as well.

Sexual Risk Avoidance Education Program

Selected Curricula: HealthSmart
Abstinence Puberty & Personal Health

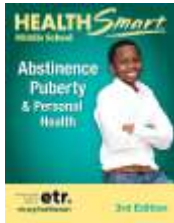
- Evidence-Informed comprehensive health education program
- Designed to be highly flexible
- For youth in 6th and 7th grade
- 10 modules in 45-60 minute sessions



Sexual Risk Avoidance Education Program

Selected Curricula: HealthSmart
Abstinence Puberty & Personal Health

- Primary goal – promote the healthy growth and development of youth and give them skills for making healthy choices that will affect life-long behavior patterns and the quality of their adult lives.
- Lessons focus on the concepts and skills that will enable students to develop, practice and support specific healthy behaviors.



Sexual Risk Avoidance Education Program

Selected Curricula: Making A Difference!

- Evidence-Based abstinence approach to teen pregnancy and HIV/STD prevention
- The program's goal is to empower young adolescents to change their behavior in ways that will reduce their risk of pregnancy and HIV or other STD infection.
- Draws upon three theories: Social Cognitive Theory, the Theory of Reasoned Action and its extension, and The Theory of Planned Behavior



Sexual Risk Avoidance Education Program

Selected Curricula: Making A Difference!

- Two major concepts: (1) Self-efficacy or perceived behavioral control beliefs and (2) Outcome expectancies or behavioral beliefs.
- For youth in 7th or 8th grade, or age 12-14 in community-based settings.
- Designed to reduce STD/HIV and pregnancy risk-related behaviors, but also increase positive attitudes and beliefs regarding abstinence, negotiation skills, and confidence in their ability to abstain from sex.



Personal Responsibility Education Program



- 1 TUSCALOOSA COUNTY HEALTH DEPARTMENT
- 2 BLACKBELT WOMEN RISING

The goal of APREP is to prevent pregnancy and the acquisition of STIs among Alabama youth through implementation of effective, evidence-based programming in order to promote successful transition to young adulthood.

This evidence-based programming will equip youth to resist sexual risk behaviors and to make choices that will promote better health and well-being as they mature into young adulthood.

Personal Responsibility Education Program



The approved EB curricula for implementation through APREP are:

- 1 TUSCALOOSA COUNTY HEALTH DEPARTMENT
- 2 BLACKBELT WOMEN RISING

- Making Proud Choices! (MPC)
- Making Proud Choices: An Adaptation for Youth In Out-Of-Home Care (MPC Plus)
- Sexual Health and Adolescent Risk Prevention (SHARP),
- Seventeen Days
- Wise Guys
- HealthSmart: HIV, STD & Pregnancy Prevention

Personal Responsibility Education Program

Selected Curricula: Making Proud Choices! (MPC)

- Evidence-based, safer-sex approach to teen pregnancy and HIV/STI prevention
- 8 module 60-minute sessions
- Goal – reduce the incidence of unprotected sexual behavior among adolescents and help them make a difference in their lives by making proud and safer choices about their sexual behavior.
- Addresses the underlying attitudes and beliefs that many young people have about birth control and condoms.



Personal Responsibility Education Program

Selected Curricula: Making Proud Choices! Plus (MPC+)

- Evidence-based, adaptation for youth in out-of-home care comprehensive pregnancy/HIV/STD prevention program
- 10 modules 75-minute sessions
- Empower in-care adolescents with greater knowledge and self-respect that will encourage them to protect themselves against unintended pregnancies and HIV/STD infection



Personal Responsibility Education Program

Selected Curricula: Making Proud Choices! Plus (MPC+)

- Many young people entering the system have experienced traumas, including neglect and abuse, that impact their psychosocial and sexual development.
- Acknowledges that abstinence is the most effective way to eliminate these risks, encourages the practice of safer sex and condom use, and gives youth in foster care the confidence they need to choose and negotiate safer-sex practices.



Personal Responsibility Education Program

Selected Curricula: Sexual Health and Adolescent Risk Prevention (SHARP)

- One-time class for young people designed to reduce risky behaviors.
- Goals of the program are to deepen STI/HIV knowledge, increase safer sex skills, reduce sexual risks and alcohol use, set long-term goals related to alcohol use and sexual behavior, identify differences between healthy and unhealthy relationships, and promote positive attitudes about development.
- Youth ages 14-19 participate in one 3.5 to 4-hour session (small same-gender groups of 3 to 7 young people)



Personal Responsibility Education Program

Selected Curricula: Sexual Health and Adolescent Risk Prevention (SHARP)

- Target both substance use and sexual risk reduction.
- SHARP content is always comprehensive, medically accurate, and evidence based. Few interventions for adolescents target both substance use and sexual risk reduction. SHARP aims to fill these gaps.
- Higher rates of STIs have been observed among youth involved with the criminal justice system. These adolescents are younger at first intercourse, have a higher number of sexual partners, and report lower rates of condom use than their peers.



Personal Responsibility Education Program

Selected Curricula: Sexual Health and Adolescent Risk Prevention (SHARP)



Program Components

Component 1: Sexual Risk Reduction Intervention

- Intensive interactive program divided into 5 sections
- Organized by gender with no more than 10 per session
- Identify a "Safer Sex" goal to achieve in the next three months at the end of session



Personal Responsibility Education Program

Selected Curricula: Sexual Health and Adolescent Risk Prevention (SHARP)



Program Components

Component 2: Motivational Enhancement Therapy

- Immediately after component 1, participants engage in a one-hour group discussion of alcohol use and sexual activity.
- Trained facilitator leads the discussion following the techniques of motivational enhancement therapy.
- Topics include current smoking behaviors, alcohol use and health consequences, and sexual risk behavior reducing strategies in the context of drinking.



Personal Responsibility Education Program

Selected Curricula: Seventeen Days



- Formerly called *What Could You Do?*, Seventeen Days is an evidence-based interactive DVD/online form designed to educate young women about contraception and STDs.
- Designed for sexually active girls ages 14 to 19
- Initial viewing time of about 45 minutes (over 3 hours of additional sessions)
- The DVD presents the viewer with different scenarios involving decisions that young women face in relationships.



Personal Responsibility Education Program

Selected Curricula: Seventeen Days

- Participants can practice what they would do in similar situations through the frequent use of "cognitive rehearsal."
- The initial session exposes the viewer to the central story, introduces the relevant characters, and presents the key lesson about condom use.
- Allows the viewer to choose one of six vignettes involving possible sexual behavior and then wraps up the main story line and hints at the additional content remaining to watch



Personal Responsibility Education Program

Selected Curricula: Seventeen Days

- Preliminary research indicates that giving young women access to the Seventeen Days film leads to better knowledge about the risks associated with different sexual behaviors and a stronger sense that they can carry out safer behaviors themselves.
- Program settings: community centers, health clinics or medical facilities, home-based, and other community-based organizations (CBOs)



Personal Responsibility Education Program

Selected Curricula: Wise Guys

- Wise Guys is an evidence-based male-oriented teen pregnancy prevention program.
- APREP has designed four different cohorts of implementation.
- Interactive, fun, and informative approach
- Schools, community and health centers, sports leagues, and faith-based groups



Personal Responsibility Education Program

Selected Curricula: Wise Guys



- Male Responsibility Curriculum Level I is designed to prevent adolescent pregnancy by teaching young males self-responsibility in several areas, primarily in the area of sexual development, decision-making and relationships.
- Money Habitudes, the financial literacy curriculum will be the adulthood preparation subject addressed with this curriculum.



Personal Responsibility Education Program

Selected Curricula: HealthSmart HIV, STI & Pregnancy Prevention



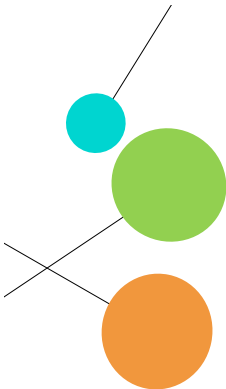
- HealthSmart is evidence-informed; grounded in sound educational and behavioral theory
- 10 modules 60-75 minute sessions
- The goal of the HealthSmart program is to promote the healthy growth and development of youth and give them the knowledge and skills to make healthy choices and establish life-long healthy behaviors.
- Curriculum can be implemented using the comprehensive program or select only the grades and/or subjects needed.



APPB Media Campaigns



- Digital Ads Display
- Billboard Display
- Publication
- Targeted Counties
 - Billboard - 6
 - Digital Ads - 16



APPB Media Campaigns - Digital



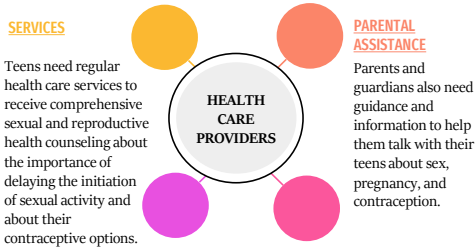
APPB Media Campaigns - Billboard



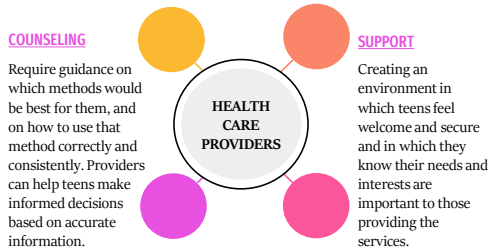
APPB Media Campaigns - Print



Health Care Providers and Teen Pregnancy Prevention

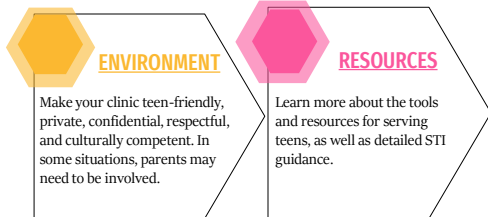


Health Care Providers and Teen Pregnancy Prevention



Health Care Providers and Teen Pregnancy Prevention

What Can You Do?



Health Care Providers and Teen Pregnancy Prevention What Can You Do?



GUIDELINES

Follow professional guidelines that recommend all teens have their first reproductive health visit between ages 11 and 15 years, with regular reproductive health visits.



PREVENTION

Understand the current trends in teen pregnancy and how it can be applied in practice. Educate using various methods to increase delay and decrease risk behaviors.

Health Care Providers and Teen Pregnancy Prevention



During the Clinic Visit:

- Ask about their past and current sexual and reproductive history.
- Counsel teens who are not sexually active on the benefits of waiting.
- Counsel those who are sexually active that they can have less sex or can decide not to have sex at all.

Visit the CDC's Reproductive Health: Teen Pregnancy for more information.

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During the Clinic Visit:

- Dual methods—IUD or hormonal method, and condoms—to prevent pregnancy, and STDs including human immunodeficiency virus (HIV).
- Make an informed decision about what contraceptive method would suit them best. Counsel them on the importance of and how to use their contraception correctly and consistently.

Visit the CDC's Reproductive Health: Teen Pregnancy for more information.

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Contraception Action Plan (CAP)

A partnership formed in 2014 between the CDC's Division of Reproductive Health, CAI, Inc., and the Washington University School of Medicine in St. Louis that led the Contraceptive CHOICE Project.

Visit CDC and contraceptionactionplan.org for more information

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Contraception Action Plan (CAP)

CAP provides evidence-based tools for clinicians and their staff to learn to:

- Provide evidence-based sexual health care
- Provide knowledge to encourage well informed decision making about contraception
- Provide same-day contraception on the day of visit

Visit CDC and contraceptionactionplan.org for more information

Sexual Health Apps and Digital Tools for Teens

1	General	<ul style="list-style-type: none"> • It Matters • Tabu' • Sexpositive
2	Clinic Finder	<ul style="list-style-type: none"> • HIV Testing Sites and Care Service Locator
3	Safety/Consent	<ul style="list-style-type: none"> • Circle of Six • Yes To Sex
4	Partner Communication	<ul style="list-style-type: none"> • So They Can Know
5	Birth Control/Safer Sex	<ul style="list-style-type: none"> • Condomcraze • Bedsider BC Reminder • HPV: The Challenge

National and State Resources

	The National Campaign to Prevent Unplanned Pregnancy		CDC's Division of Reproductive Health
	Sex, Etc.		Alabama Campaign To Prevent Teen Pregnancy
	The Office of Adolescent Health		Alabama Central and Local County Health Departments

Additional Sources

- CDC.gov
- Youth.gov
- Alabama Campaign for Adolescents Health
- ADPH Center for Health Statistics
- America's Health Ranking
- Answer.Rutgers.edu
- ADPH STD Prevention and Control Annual Report
- Worldpopulationreview.com
- National Center for Health Research
- International Journal of Epidemiology, Volume 31, Issue 3, June 2002
- American Journal of Health Behavior Vol. 33,1 (2009)
- Bmj.com
- Pcmag.com